

## STATE OF ARKANSAS TOWING & RECOVERY BOARD PO BOX 8285

**SEARCY, ARKANSAS 72145** 

www.artowing.arkansas.gov

	Office Use Only
NO:	
EXPIRES:	

## **NONCONSENT**

## TOW VEHICLE SAFETY EQUIPMENT INSPECTION FORM

(Any certified law enforcement officer is authorized to examine)

OWNER INFORMATION: Firm:		City:				
VEHICLE INFORMATION: Year:	Make: Ty	pe: *W H RB VIN	#			
Commercial Tag: Storage Rates:						
Gross Vehicle Weight Rating: Light- 9,0 TOWING AND/OR RECOVERY SAFE				33,001 – up lbs		
1. Fire Extinguisher, ABC Type	of at least nine (9) pound	d capacity.				
2. Amber Flashing Lights that ar tow vehicles hooking up, unh	e visible within 360-deg	ree rotation around the				
3. Tail, Turn, and Stop Lights to						
, , , ,	Safety chains or straps to secure the towed vehicle to the tow vehicle.					
5. Flares, reflective cones or tria			es.			
<del></del>	Shovel and Broom as equipment for tow vehicles used in accident recovery.					
7 Towing business's name and		•	d or indicated by a decal	on each side of the		
tow vehicle so that it is visible						
8. Light and air brake hookups (vehicles).	equired only on equipme	ent capable of towing s	emi-trucks and trailer			
9 Safety straps for wheel lift eq	Safety straps for wheel lift equipment as required by the equipment manufacturer.					
10 Winch(s) on tow vehicles used capacity of (L) 8,000 pounds proportionately with the Gross	and minimum cable size	e of 3/8" (inch) diamete				
11 Dual rear wheels and rated at safety permit was applied with	a minimum of 9,000 GV	WR. (This requiremen				
12. Trailer, dolly, or other separate				1, 1994]).		
movement of vehicles on publ			otherwise racintate the			
13*Medium Duty Tow Vehicle,	excluding rollback tow v	ehicles, equipped with	an under-lift device rated	d at no less than		
6,500 lbs. at full extension. (T						
within ninety (90) days after e				11		
14 **Heavy Duty Tow Vehicle w						
lbs. at full extension. (This red				s applied within		
ninety (90) days after enactme				1:1 (0 1		
15 Three pictures: One picture o to verify if wrecker, rollback,				ow vehicle (far enough away		
*Minimum requirements specified in Rule 7 seq.						
EXAMINATION INFORMATION: Dat						
Examining Officer Name:		Badge No:	Agency:			
Officer Signature:						
Affirmation of Company Owner or Repr	esentative:					
DO NOT WRITE BELOW THIS LINE APPLICATION INFORMATION: Date						
Pictures:License tag,*  * W- Wrecker RR- Rollback H- Haule	Name & Phone No. of					